Dear

Further to your request for information dated 15 November 2017 the information requested is below

- **Have referral policies changed for elective procedures for patients who are obese (with a BMI of 30 or above)?**

  NHS Dartford Gravesham and Swanley Clinical Commissioning Group has not changed referral policies for elective procedures for patients who are obese (with a BMI of 30 or above)

- **Have referral policies changed for elective procedures for patients who smoke?**

  NHS Dartford Gravesham and Swanley Clinical Commissioning Group has not changed referral policies for elective procedures for patients who smoke.

- **Are you considering changing referral policies for elective procedures for patients who are obese?**

  Not actively (to the best of our knowledge) but the CCG cannot rule out that this will be considered at some point in the future.

- **Are you considering changing referral policies for elective procedures for patients who smoke?**

  Yes – please see below

- **If yes to any of the above what has the change been or what change are you considering?**
In September 2017 the Kent and Medway Policy recommendation and Guidance Committee 9PRGC) issued a policy recommendation (PR207-13) on smoking status prior to non-urgent surgery. It recommends that:

- At referral for consideration of suitability for non-urgent surgery, the GP should check the patient’s current smoking status and refer patients who smoke tobacco to smoking cessation services, unless the patient explicitly refuses consent.
- When the decision is made that a patient requires non-urgent surgery, the responsible clinician should check the patient’s current smoking status and refer patients who smoke tobacco to smoking cessation services, unless the patient explicitly refuses consent.
- All clinicians should inform patients about the risks of smoking prior to surgery and the benefits of quitting.

To clarify PR2017-13 does not constitute a mandatory stop smoking a policy. Adoption of PR2017-13 will not result in surgery being denied or delayed if patients do not quit smoking or complete a smoking cessation programme. PR2017-13 will only be implemented once ratified by all Kent and Medway CCGs.

- **What is the current average wait from referral to treatment for elective hip replacements for patients who are obese or smoke?**

  The average waiting time for elective hip replacements is the same irrespective of obesity or smoking status. The CCG does not have information at individual procedure level. However, all providers of hip replacement surgery are required to treat patients within a maximum of eighteen weeks from referral to treatment.

- **What is the current average wait from referral to treatment for elective hip replacements for patients who are not obese and do not smoke?**

  The average waiting time for elective hip replacements is the same irrespective of obesity or smoking status. The CCG does not have information at individual procedure level. However, all providers of hip replacement surgery are required to treat patients within a maximum of eighteen weeks from referral to treatment.

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If you are not content with the outcome of your complaint or review, you may apply to the Information Commissioner for a decision. Generally the ICO cannot make a decision unless you have exhausted the complaints procedure provided by the Clinical Commissioning Group. The Information Commissioner can be contacted at:

Information Commissioners Office,
Wycliffe House,
Water Lane,
Wilmslow,
Cheshire
SK9 5AF
Telephone: 08456 306060 or 01625 54 57 45
www.ico.gov.uk

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